

POWER OF ATTORNEY OR REVOCATION OF POWER OF ATTORNEY WITH A NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number		10/582,006-Conf. #8938	
	Filing Date		June 7, 2006	
	First Named Inventor		Ching-Juh Lai	
	Title	MONOCLONAL ANTIBODIES THAT BIND OR NEUTRALIZE DENGUE VIRUS		
	Art Unit			
	Examiner Name			
		Attorney Docket No.		84403(47992)

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.
OR
☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

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OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number	Practitioner(s) Name	Registration Number

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:
OR
☒ The address associated with Customer Number:

46037

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Peter F. Corless EDWARDS ANGELL PALMER & DODGE LLP
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I am the:

☐ Applicant/Inventor.
OR
☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record			
Signature	/Peter F. Corless/	Date	September 11, 2009
Name	Peter F. Corless	Telephone	(617) 517-5557
Title and Company	Attorney for Assignee		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.